	Approved F	or Release 200	6/09/25*CfA4	D ₱75-00399	R0001001201	09-4		
REPORTS INVENTORY						CONTROL NO.		
PREPARE IN DUPLICATE					XX	XXXXXXX DDS/OL/SD-5		
1. TITLE OF REPORT (if a fill-in report include Form No.)						X STATISTI	CAL	
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11000		ERSONNEL	TRAININ				NAME LISTING	
3. FUNCTIONAL AREA X		GISTICS		SECURITY		ADMIN. GENERAL OTHER (specify)		
		EDICAL	FINANCE					
4. NO. OF COPIES PREPARED		5. FREQUENCY (weekly, monthly, quarterly, etc.)		terly, etc.)	6. DISTRIBUTION (No. of components not number of copies)			
5		Monthly			4			
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16. DATE OF INVE		AME AND TITLE OF F			na n Cl		18. EXTENSION	
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